

Patient-centered medical home and health care reform

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Overview of presentation

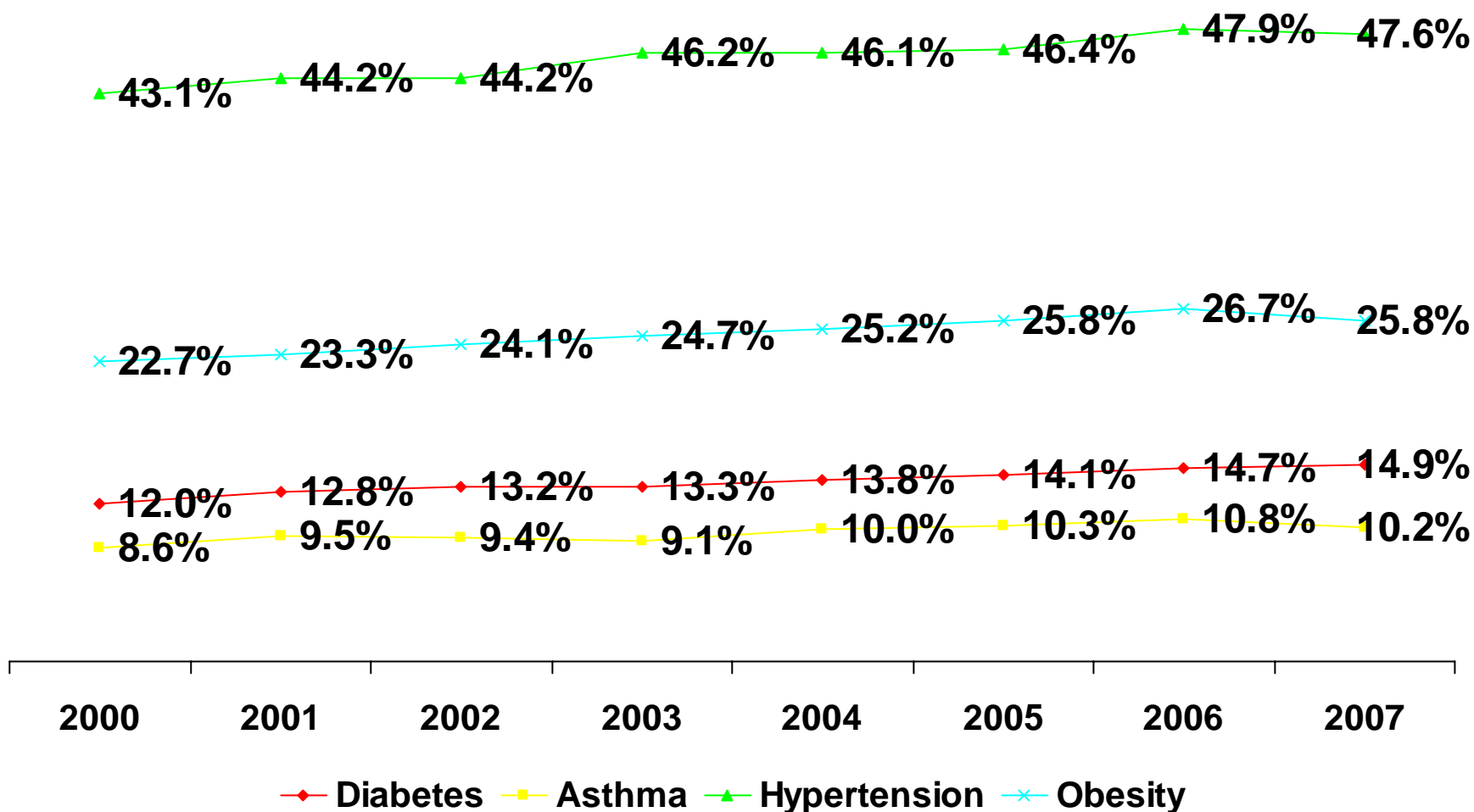
- Patient-centered primary care, medical homes and health reform
- AARP's views on medical homes
- Patient centeredness as a key element

Patient-centered primary care and health reform

- Build the infrastructure for expanded coverage
- Key element of health reform is changing the delivery system:
 - Strengthen and improve the information infrastructure
 - Reform the delivery of care through better coordination and integration
 - Restructure payment approaches to promote value
- Medicare must be a value purchaser
- Improve health status through healthy behaviors, health promotion, and public health
- Patient centered primary care is a key element to many of these goals.

A Framework for Health Security, AARP, Summer 2008

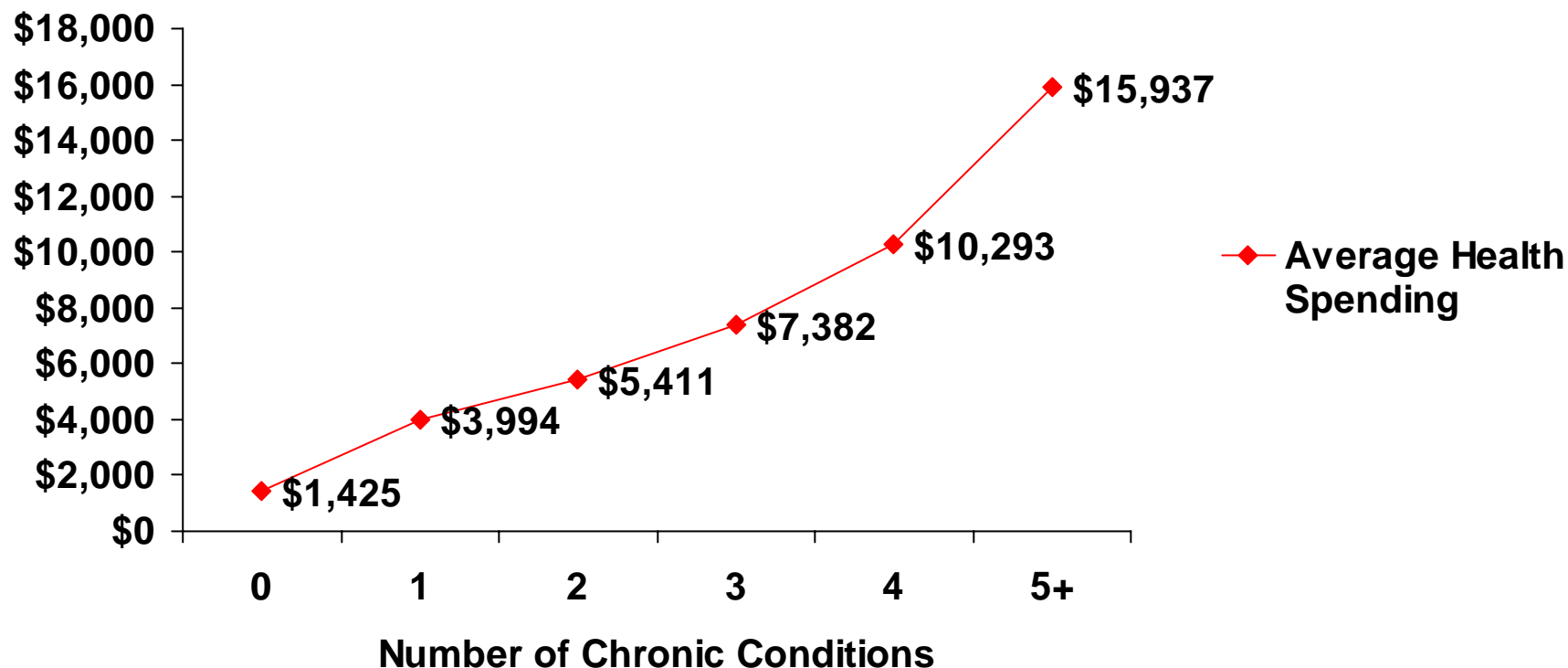
Rise of chronic disease among the 50+ population



Source: AARP Public Policy Institute Analysis of National Health Interview Survey, 2000-2007.

Concentration of spending among people with chronic disease

Health Care Spending Increases with the Number of Chronic Conditions



Source: Analysis of AHRQ Medical Expenditure Survey 2005 data.

Issues with quality and patient experience

- New results from 2008 PPI survey for Beyond 50:
 - About a fifth of people with chronic conditions reported that their providers did not communicate well with each other
 - The same share think their health has suffered because of the lack of communication
- Lots of evidence about poor transitions – people leave hospital, ER without understanding discharge information, drugs they need to take

AARP position: Medical Homes hold promise and should be tested

- Model worth exploring and expanded rapidly when successful
- Individual should voluntarily select a clinician or practice that is accountable for their care
- Scope includes coordinating and enhancing access to services, including self management
- Coordination is helped by health information technology, registries, and information exchange among providers in different settings

AARP position: Medical Homes hold promise and should be tested (cont.)

- Patient access is easy, including outside of business hours
- Clinicians should periodically assess patient's needs based on evidence-based protocols and use data to identify and track patients' conditions
- They also should assess social and support needs and resources of the patient and her caregivers
- Collecting and reporting out performance on cost and quality is important; homes should have the infrastructure and capacity to collect and monitor this information

Patient centeredness as a key element

- care should be based on continuous health relationships;
- care should be customized based on patient needs and preferences;
- patients should be the source of control;
- knowledge should be shared and information should flow freely across settings, including into long-term care settings

IOM, 2001.

- Concept should be broader than just patients to include family caregivers as partners in care. Caregivers should be part of health promotion and education communication.